

RELOCATION CLAIM - APPLICATION AND RELEASE

RE1527 04/2015 s. 32.19, 32.195 & 32.20 Wis. Stats.

Wisconsin Department of Transportation

Region Use ONLY

Claim Received and Filed

Claimant (print name)		Date
Replacement property address		Place
Claimant property address	Mailing address, if different	By

Listed below are itemized relocation items claimed as the result of the acquisition of private property for public use, exclusion of all compensation previously agreed to, for the negotiated purchase or the Award of Damages as determined by the State of Wisconsin, Department of Transportation. All items payable under Sections 32.19 and 32.195 Wi Statutes should be claimed at one time after expenses are incurred as provided in Section 32.20 Wi Statutes.

Owner	Business	Residence	Purchase
Tenant	Farm	Sign	Rental
	Non-profit		
		<input type="checkbox"/> Off premise	
		<input type="checkbox"/> On premise	

Description of Items Claimed (attach receipts and documentation)	Amount Claimed	Amount Approved
1. Moving expenses [actual - new site] s.32.19(3)(a)	\$	\$
2. Moving expenses [re-establishment expenses] s.32.19(3)(a)	\$	\$
3. Moving expenses [optional fixed residential] s.32.19(3)(b)1 no. of rooms	\$	\$
4. In lieu of actual moving expenses s.32.19(3)(b)2	\$	\$
5. Replacement housing [owner occupant] s.32.19(4)(a)	\$	\$
6. Increased interest [owner occupant] s.32.19(4)(a)2 - (4m)(a)2	\$	\$
7. Closing costs and related expenses s.32.19(4)(a)3 - (4m)(a)3 - (4m)(b)2c	\$	\$
8. Replacement housing [tenants and certain others - rental] s.32.19(4)(b)1	\$	\$
9. Replacement housing [tenants and certain others - purchase] s.32.19(4)(b)2	\$	\$
10. Replacement business [farm owner] s.32.19(4m)(a)	\$	\$
11. Replacement business [farm tenant] s.32.19(4m)(b)	\$	\$
12. Incidental expenses - acquisition s.32.195(1)	\$	\$
13. Incidental expenses - penalty costs on old mortgage s.32.195(2)	\$	\$
14. Incidental expenses - pro rata share of taxes s.32.195(3)	\$	\$
15. Incidental expenses - realignment of personal property [same site] s.32.195(4)	\$	\$
16. Incidental expenses - expense of plans rendered unusable s.32.195(5)	\$	\$
17. Incidental expenses - net rental loss s.32.195(6)	\$	\$
18. Incidental expenses - cost of fencing s.32.195(7)	\$	\$
TOTAL	\$	\$

For State Use Only (claimant complete next page)

Items recommended for approval	Real Estate Agent	Regional Real Estate Manager	Date
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Items in the above claim are allowed in the total sum of \$ on this date .

X	
Approving Authority	Date

Print Name

Project ID

County

Parcel No.

CLAIMANT CERTIFICATION

1. The undersigned certifies that the foregoing statement is true and correct and that the damages described herein exist and costs have been suffered by me (us) in the amount shown after each item.
2. I (We) agree to accept the amounts as payment in full for the items claimed, and release the Department of Transportation and any public body, board or commission acting in its behalf, from any and all claims for damages arising through this project, for the listed items for which an amount is claimed.
3. In claiming payment for an amount under Item 5 [s.32.19(4)(a)], I (We) certify that: I (We) was (were) in occupancy at least 180 days prior to the date of initiation of negotiations for the acquisition of the property.
4. In claiming payment for an amount under Item 8 or 9 [s.32.19(4)(b)], I (We) certify that: I (We) was (were) in lawful occupancy for not less than 90 days prior to the initiation of negotiations for the acquisition of the property.
5. I (We) certify that: to the best of my (our) knowledge the replacement dwelling I (We) have purchased and occupy, meets the decent, safe and sanitary standards prescribed by state and federal regulations for such property.
6. In claiming payment for an amount under Item 10 or 11 [s.32.19(4m)], I (We) certify that: I (We) owned and occupied the business operation or owned the farm operation for not less than 1 (one) year prior to the initiation of negotiations for the acquisition of the property.
7. Any person who is an alien not lawfully present in the United States is ineligible for relocation advisory services and relocation payments, unless such ineligibility would result in exceptional and extremely unusual hardship to a qualifying spouse, parent, or child as defined in 24.208(i) CFR. I certify that all member(s) of my household or all owner(s) of an unincorporated business, farm, or nonprofit organization is (are) a citizen or national of the United States, or an alien who is lawfully present in the United States.

AGREEMENT AND CERTIFICATION

Owner-Occupant claiming a Replacement Housing Payment (Item 5, s.32.19(4)(a)), and/or Replacement Business Payment (Item 10, s.32.19(4m)(a)), and/or a Replacement Farm Payment for Lands (Item 10, s.32.19(4m)(a)) acquired by any Conveyance or by an Award of Damages pursuant to Chapter 32, Wisconsin Statutes. Claimant understands that, in the event of an appeal from an Award of Damages, s.32.05(9) or from the amount of compensation stated on the Warranty Deed, s.32.05(2a) for the required right of way from a residential, business, or farm property, any increase in the Basic Award shall be reduced by the amount of the replacement residential, business or farm payment as claimed. If the residence is located on a farm or business property or on a land area larger than that typical for residential site purposes, the claimant understands that any increase in the Basic Award attributable to the residential portion shall be computed in the same percentage ratio established in the offering price of the Basic Award. Any increase in the Basic Award, attributable to the business portion shall reduce the amount of the replacement business payment. The business portion shall be computed in the same percentage ratio established in the offering price of the Basic Award. Any increase in the Basic Award, attributable to the farm portion shall reduce the amount of the replacement farm payment. The farm portion shall be computed in the same percentage ratio established in the offering price of the Basic Award. In no event shall the final determination of just compensation be reduced by more than the amount of the replacement residential, business or farm payment.

X

Claimant Signature Date

Print Name

X

Claimant Signature Date

Print Name

(Notarization is required for claims for Replacement Payments ONLY.
Items 5 and 10 Adm. 92.90 (6) advance payments in condemnation.)

Date
State of Wisconsin)
) ss.

County)
On the above date, this instrument was acknowledged before me by
the above-named person(s) or officers.

Signature, Notary Public, State of Wisconsin

Print Name, Notary Public, State of Wisconsin

Date Commission Expires

Attach all receipted bills, paid statements and other factual data supporting claim. In support of a "net rental loss" claim, submit a record of all rent for the property showing that losses claimed are directly attributable to the public improvement and that losses exceed the normal rental or vacancy experience for similar properties in the area. This claim must be signed by claimant and such signature must be notarized prior to the time application is submitted to the state for Items 5 and 10. Mail this form and all receipted bills and other factual data to WisDOT regional office.